099/1850

PTO/SB/06 (08-03)

Approved for use through 7/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 CLAIMS AS FILED - PART I OTHER THAN OR SMALL ENTITY SMALL ENTITY (Column 2) (Column 1) FOR NUMBER FILED NUMBER EXTRA RATE FFF FFF RATE BASIC FEE (37 CFR 1.16(a)) OR TOTAL CLAIMS (37 CFR 1.16(c)) minus 20 = OR INDEPENDENT CLAIMS (37 CFR 1.16(b)) minus 3 = OR MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR * If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL OR TOTAL CLAIMS AS AMENDED - PART II OTHER THAN OR (Column 1) (Column 2) (Column 3) **SMALL ENTITY** SMALL ENTITY CLAIMS HIGHEST 4 PRESENT REMAINING NUMBER RATE ADDI-RATE ADDI-ENT **PREVIOUSLY EXTRA** AFTER TIONAL TIONAL AMENDMENT PAID FOR FFF FEE ENDMI Total Minus (37 CFR 1.16(c)) OR X S Independent Minus = OR ₹ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR = + 4 TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST PRESENT REMAINING NUMBER RATE ADDI-RATE ADDI-**AFTER PREVIOUSLY EXTRA** TIONAL TIONAL AMENDMENT PAID FOR FEE FEE Total (37 CFR 1.15(c)) Minus ENDMI OR X S Minus = OR ₹ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR + \$ TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST () **PRESENT** REMAINING NUMBER RATE ADDI-RATE ADDI-ENT **EXTRA** PREVIOUSLY **AFTER** TIONAL TIONAL AMENDMENT PAID FOR FEE FEE Total Minus = ENDM (37 CFR 1.16(c)) X \$ OR X \$ Independent (37 CFR 1,16(b)) Minus OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Effective October 1, 2000												-6
CLAIMS AS FILED - PART (Column 1)						(Column 2)		SMALL ENTITY TYPE		OTHER THAN' OR SMALL ENTITY		
TOTAL CLAIMS 25								RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	·710.00
TOTAL CHARGEABLE CLAIMS			25 minus 20=		. 5			X\$ 9=		OR	X\$18=	90
INDEPENDENT CLAIMS			3 minus 3 =					X40=		OR	X80=	
MUL	TIPLE DEPEND	DENT CLAIM PF	ESENT '					+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2						ı	TOTAL		OR	TOTAL	800	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							•	SMALL 1	ENTITY	OR	OTHER SMALL	
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OME	Total	• 24	Minus	••)()	. Y		X\$ 9=		OR	X\$18=	
ME	Independent	· 25	Minus	٠· ک)			X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT					TCLAIM		j	+135=		OR	+270=	
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AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NU! PREV	MBER NOUSLY O FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
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AME	Independent	• • 5	Minus	***	<u> </u>	- 1/	4	X40=		OR	X805=	rie
لــا	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J	+135=		OR	4270=	
	_							TOTAL		OR	TOTAL	Pa
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2		AMENDMENT			FOR	<u> </u>	4		FEE	1	·	FEE
AMENDMENT	Total	.19	Minus	<u>ئ</u>	25_]	X\$ 9=		OR		1
AME	Independent	· 4	Minus	enne	HT CLAIR	- /	4	X40=		OR	X86-	
 	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						٤	+135=		OR	300	[7]
" If the entry in column 1 is less than the entry in column 2, write "O" in column 3. " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."								TOYAL ADDIT. FEE		ОЯ	TOTAL ADDIT: FEE	
-	If the Wiebast his	imber Proviously f mber Proviously Pr	bald For IN TH	19 SPACI	E is less th	an 3. enter " 3.'	•			ox In c	olumn 1.	_

PATENT APPLICATION FEE DETERMINATION RECORD

FORM PTO-875 (Plac. 8/00) Application or Docket Number